## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE					
FEE DETERMINATION								
O.I.P.E. CLASSIFIER		6	5-22-9					
FORMALITY REVIEW								
RESPONSE FORMALITY REVIEW								

## **INDEX OF CLAIMS**

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If more than 150 claims or 10 actions staple additional sheet here